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T-419 P.02/02 F-216

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GENENTECH, INC
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Christine Ricks

(Depositor's Name)

February 19, 2004

(Signature)

(Date)

APPLICATION NO	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO	CONFIRMATION NO
09/716,028	11/17/2000	Henry B. Lowman	P1123RID1	7056

TITLE OF INVENTION. THERAPEUTIC COMPOSITIONS COMPRISING ANTI-IGF ANTIBODIES AND IMMUNOSUPPRESSIVE AGENT

APPLN TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$0	\$1330	02/19/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
EWOLDT, GERALD R	1644	530-388730

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47, Rev. 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Craig G. Svoboda

2.

3.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Genentech, Inc.

(B) RESIDENCE (CITY AND STATE OR COUNTRY)

South San Francisco, California

Please check the appropriate assignee category or categories (will not be printed on the patent).

☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee☐ Publication Fee☐ Advance Order - # of Copies

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☐ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized by change the required fee(s), or credit any overpayment, to Deposit Account Number 07-0630 (enclose an extra copy of this form)

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February 19, 2004

(Authorized Signature)

Craig G. Svoboda

(Date)

Reg. No. 39,044

2/19/04

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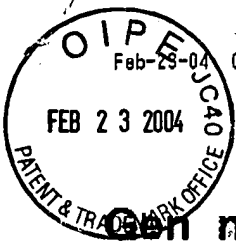
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FACSIMILE TRANSMITTAL

DATE: February 23, 2004

Please deliver the following page(s) to:

NAME: Commissioner for Patents
P.O. Box 1450
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Fax No.: (703) 746-4000

FROM: Craig G. Svoboda *CS* 2/23/04
Registration No.: 39,044

RE: U.S. Serial No.: 09/716,028
Our Docket No.: P1123R1D1

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Enclosed for consideration and entry on the record in connection with the above application are: this cover page (1), and (2) Copy of Issue Fee mailed February 19, 2004.

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